



2003

Maine Revenue Services and Maine Department of Labor

030854000

Combined Filing for Income Tax Withholding and Unemployment Contributions

FORM 941/C1-ME LOOSE QUARTER #

Name and Address, Withholding Account No., UC Employer Account No., Period Covered

Part One - Income Tax Withholding

- 1. Maine income tax withheld this quarter
2. Less any semi-weekly Payments
3. Income tax withholding due

Part Two - Unemployment Contributions Report

OFFICE USE ONLY, Seasonal Code, Seasonal Period, 1st Month, 2nd Month, 3rd Month, 4. Enter in the space under each month...

Part Three - Calculate the Total Amount Due

- 11. Amount due with this return (line 3 plus line 10)

CANCELLATION NOTICE

Check this box and complete the following section if your business is discontinued or payment of wages permanently ceases. DO NOT REPORT CHANGE FOR A SEASONAL SHUTDOWN PERIOD

No Longer Have Employees - Effective: Last Payroll Date: Business Sold To (name): Date Sold: (address): Tel. #:

Under penalties of perjury, I certify that the information contained on this return, report and attachment(s) is true and correct.

Signature Date Title Telephone

Make Check Payable to Treasurer, State of Maine Mail to: Maine Revenue Services P.O. Box 9103 Augusta, ME 04332-9103

office use only PWD

Name _____

Withholding Account No. _____

UC Account No. _____

Period Covered _____

030461000

FORM 941/C1-ME LOOSE

INCOME TAX WITHHELD

Part Four - Quarterly Unemployment Contribution Wage & Income Tax Withholding Listing

All employers designated Seasonal by the Department of Labor, see instructions for column 16 on page 8 of the booklet.

14. Employee Name (Last, First, MI)	15. Social Security Number	16. Unemp Comp Gross Wages Pd	Seasonal?	17. ME Income Tax Withheld in Qtr
a. _____	_____	\$ _____	<input type="checkbox"/>	\$ _____
b. _____	_____	_____	<input type="checkbox"/>	_____
c. _____	_____	_____	<input type="checkbox"/>	_____
d. _____	_____	_____	<input type="checkbox"/>	_____
e. _____	_____	_____	<input type="checkbox"/>	_____
f. _____	_____	_____	<input type="checkbox"/>	_____
g. _____	_____	_____	<input type="checkbox"/>	_____
h. _____	_____	_____	<input type="checkbox"/>	_____
i. _____	_____	_____	<input type="checkbox"/>	_____
j. _____	_____	_____	<input type="checkbox"/>	_____
k. _____	_____	_____	<input type="checkbox"/>	_____
l. _____	_____	_____	<input type="checkbox"/>	_____
m. _____	_____	_____	<input type="checkbox"/>	_____
n. _____	_____	_____	<input type="checkbox"/>	_____
o. _____	_____	_____	<input type="checkbox"/>	_____
p. _____	_____	_____	<input type="checkbox"/>	_____
q. _____	_____	_____	<input type="checkbox"/>	_____
r. _____	_____	_____	<input type="checkbox"/>	_____
s. _____	_____	_____	<input type="checkbox"/>	_____
t. _____	_____	_____	<input type="checkbox"/>	_____
u. _____	_____	_____	<input type="checkbox"/>	_____
v. _____	_____	_____	<input type="checkbox"/>	_____
w. _____	_____	_____	<input type="checkbox"/>	_____

18. Total on this page a. _____ b. _____

19. Total for ALL pages a. _____ b. _____